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CONFIRMATION NO. 4897

Bib Data Sheet

SERIAL NUMBER 10/689,690	FILING OR 371(c) DATE 10/22/2003 RULE	CLASS 370	GROUP ART UNIT 2616	ATTORNEY DOCKET NO. 2486/SPRI 107676
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 01/22/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after		
Verified and Acknowledged	Examiner's Signature:		
	Initials:		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
MD	6	55	5

ADDRESS

32423

TITLE

System and method for selective enhanced data connections in an asymmetrically routed network

FILING FEE RECEIVED 1572	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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